

MEDICINE TODAY

Current comment on medical progress, discussion of selected topics from recent books or periodic literature, by contributing members. Every member of the California Medical Association is invited to submit discussion suitable for publication in this department. No discussion should be over five hundred words in length.

Medicine

Pellagra.—The cause of pellagra is one of the subjects of medicine about which there is considerable controversy, but in the light of the more recent research the nutritional theory seems to be the most probable.

It is believed that inasmuch as the disease is undoubtedly on the increase in California, a short discussion of it will not be untimely.

During the ten years, 1920 to 1929 inclusive, 449 cases of the disease have been reported to the California State Department of Health.

While this number of cases is not very large as compared with other diseases, the fact that it was more than four and one-half times more prevalent in 1929 than in 1920, should certainly stimulate our interest.

The following is a list of cases as reported year by year:

1920.....	16
1921.....	21
1922.....	32
1923.....	42
1924.....	38
1925.....	63
1926.....	58
1927.....	45
1928.....	61
1929.....	73

This list is probably, to a large extent, made up of cases that have occurred in institutions and public health agencies throughout the state. There unquestionably have been many more that were unrecognized or unreported in private practice.

Increased population alone does not account for the increase, for the population in 1920 was 3,426,861 and was approximately only 4,556,000 in 1928. In 1920 there was reported one case for approximately every 215,000 inhabitants, while in 1929 the ratio was about one reported for every 62,500.

Evidently there is something in the present economical, nutritional or hygienic condition of our population that is more marked than it was in 1920.

In the September 2, 1927, issue of the United States Public Health Report, Goldberger reiterated his nutritional theory and gave a short description of the disease.

He stated that the disease was in no way communicable; that no germ had been found and that experiments in which inoculation with blood, saliva and other body discharges from pellagrins, failed to transmit the disease. On the other hand, he found that restricting the diet in certain proteid foods in healthy individuals did produce

the chain of symptoms which we know as pellagra.

He believed that these symptoms were caused by the deficiency of some vitamin or vitamins which he designated as P-P (pellagra-preventing) vitamin. In his experiments he found that such foods as beans, peas, lean meat, milk and powdered yeast were rich in P-P, particularly the latter. Fruits, potatoes, turnips, string-beans, tomatoes, cabbage and spinach also contain P-P but in smaller amounts.

During the past four or five years, in our work at the Alameda County Health Center, we have been struck by the great increase in the number of pellagrins who are alcoholics. The histories of these individuals show they had been well until they went upon a prolonged spree and that the first symptoms of the disease had appeared immediately thereafter. How much of this condition can be attributed to alcohol and how much to the lack of proper diet during the spree is conjectural.

For prevention and treatment of the disease, Goldberger advocated milk (about two pints daily); lean meat (beef, mutton, pork, fish, fowl), one-half pound per day; and powdered yeast, one ounce per day. This latter, when killed, is richer in P-P vitamin than any other substance known. The dry yeast should be powdered and then boiled in water for one minute before using.

During an actual or impending attack one should begin with foods rich in P-P and at the same time within the capacity of digestion. It is best to begin with powdered yeast (prepared as noted above); milk (sweet or buttermilk); lean meat (fresh meat juice, scraped beef); egg yolk; tomato juice (fresh or canned); and bean or pea puree. As improvement occurs increasing amounts of solid foods may be added.

F. H. STIBBENS, Oakland.

Eye

Foreign Bodies in the Cornea.—All cases of foreign body in the cornea are potentially dangerous, and should be treated by an oculist if possible. The first step in treatment is to find the foreign body, and for this purpose, perfect light, preferably a Hammer lamp, and magnification are essential. A Berger loupe is usually adequate, but in some cases a slit lamp and corneal microscope may be necessary. The foregoing would seem obvious, but every oculist has seen cases in which very strenuous efforts had been